PTO/SB/06 (07-06) Approved for use through 1/31/2007, OMB 0651-0032

Approve to use introgen for use of the Approve to use in though 1971 (2005). Approve to use in the Approve to

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/585,862			ing Date 11/2006	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							OTHER THAN SMALL ENTITY ☑ OR SMALL ENTITY					
FOR			JMBER FIL	.ED N	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		N/A]	N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),		N/A		N/A		N/A]	N/A		
	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *			x \$ =		OR	x s =		
	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *				x \$ =		1	x s =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 ional 50 s	er, the applicat for small entity	on thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							TOTAL		1			
* If the difference in column 1 is less than zero, enter "0" in column 2.									J	TOTAL		
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	09/09/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 20	Minus	·· 20	= 0]	X \$26 =	0	OR	x s =		
	Independent (37 CFR 1.16(h))	• 1	Minus	 3	= 0]	X \$110 =	0	OR	x s =		
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
						•	TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus]	x \$ =		OR	x s =		
	Independent (37 CFR 1,16(h))		Minus	***]	x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))					ı			1			
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					Ĺ			OR	l		
Γ						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
**	If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner: "If the "Highest Number Proviously Paid For I'M THIS SPACE is less than 20, enter" 20". "If the "Highest Number Proviously Paid For I'M THIS SPACE is less than 3, enter" 3". TONII HAKIM The "Highest Number Proviously Paid For I'M I HIS SPACE is less than 5, enter 3".											

This collection of information is orquined by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public with in it is life (and by the USPTO to process) an application Confidentiality is operand by 38 US 6.12 and 37 CFR 1.4. It has location in estimated to the bet 2 minutes to complete, encluding pathenapy, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the CERF (information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.